

<u>TREASURER OFFICE USE ONLY</u>	<b>MAIL REFUND REQUEST TO:</b>  <b>HONORABLE ALEXI GIANNOULIAS</b> <b>ILLINOIS STATE TREASURER</b> <b>300 WEST JEFFERSON STREET</b> <b>LEVEL 2</b> <b>SPRINGFIELD, IL 62702-5041</b> <b>ATTENTION: <u>ESTATE TAX DIVISION</u></b>	<u>TREASURER OFFICE USE ONLY</u>
	<small>IF YOU NEED ASSISTANCE COMPLETING FORM, CALL (217) 782-4296</small>	

**PETITION FOR REFUND**

(FOR ESTATE TAX CASES)

SUBMITTED ON: \_\_\_\_\_

ESTATE NAME: \_\_\_\_\_ COUNTY OF RESIDENCE: \_\_\_\_\_

DEATH DATE: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

**DEPOSITS MADE TO \_\_\_\_\_ COUNTY**

(PLACE COUNTY NAME IN BLANK)

AMOUNT(S): \$ \_\_\_\_\_

DATE (S): \_\_\_\_\_

(COPIES ENCLOSED) \$ \_\_\_\_\_

\$ \_\_\_\_\_

**CERTIFICATE(S) OF DISCHARGE FOR \_\_\_\_\_ COUNTY**

**A.G. FILE NO.** \_\_\_\_\_

(PLACE COUNTY NAME IN BLANK)

AMOUNT(S): \$ \_\_\_\_\_

DATE (S): \_\_\_\_\_

(COPIES ENCLOSED) \$ \_\_\_\_\_

\$ \_\_\_\_\_

STATEMENT OF AUTHORITY TO RECEIVE REFUND: \_\_\_\_\_

**AMOUNT OF REFUND REQUESTED:**

\$

(SIGNATURE AND  
TITLE OF PERSON  
AUTHORIZED TO  
RECEIVE  
REFUND)

(PRINT AND SIGN NAME OF PERSON TO RECEIVE REFUND)

(TITLE, I.E. ADMINISTRATOR, EXECUTOR,  
PETITIONER, ETC.)

IN CASE OF PROBLEMS WITH REFUND  
REQUEST, PLEASE SUPPLY THIS OFFICE  
WITH A CONTACT PERSON AND PHONE

**MAKE REFUND PAYABLE TO:**

(ONE LINE ONLY AND NO MORE THAN 26 CHARACTERS)

**REFUND SHOULD BE SENT TO:**

(NO MORE THAN 24 CHARACTERS FIRST THREE LINES)

**(PLEASE INCLUDE 5+4 DIGIT ZIP CODE)**

**NOTARY SEAL**

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

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